

Name in Full

Certificate of Death

Died at

County

MARYLAND

Date 189

Month Day

Y.

M.

D.

Native of

Occupation

Male

White

Age

~~Married~~~~Widow~~~~Divorced~~~~Female~~~~Colored~~

Single

~~Widower~~

Number of children living

5

Husband

of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

Death

Immediate

How long sick

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 1900



Died at

MARYLAND

Date 189

~~Male~~

White

Married

~~Widow~~~~Divorced~~

Female

Colored

Single

Widower

Number of children living

Husband

of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

Death

Immediate

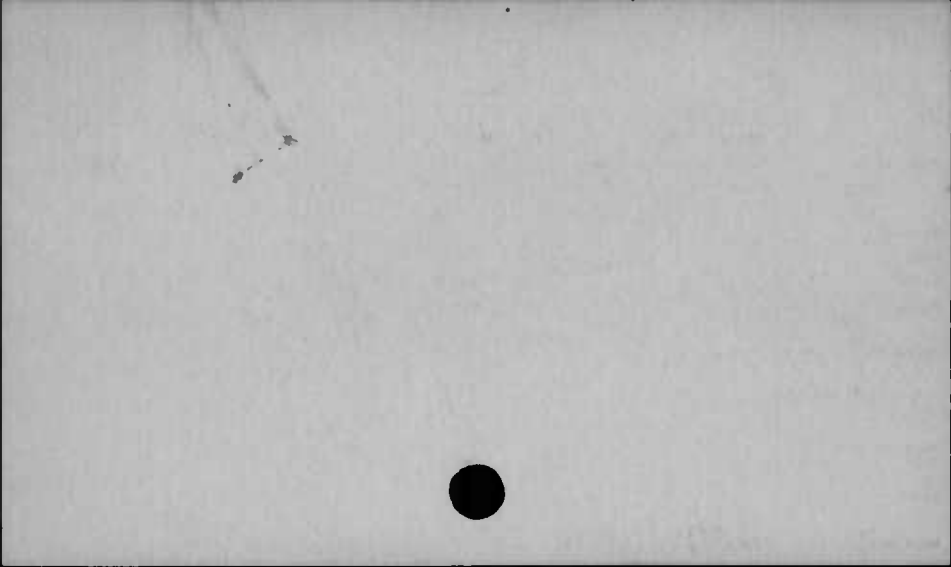
How long sick

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

George Ashton Dodd

Died at ^{Town} *Martinsburg*, ^{County} *Montgomery Co*

MARYLAND

Aug ^{Month} *19* ^{Day} *8* Y. *87* M. *87* D. *87* Native of *Ind* Occupation *farmer*

Date 189 *8* Age *87* ~~Married~~ ~~Widow~~ ~~Divorced~~ ~~Widower~~ Number of children living *4*

Husband
of
Wife

Father's

Mother's

Name

Name

Cause of Death { Primary *Cold age* Immediate *141* How long sick *one week*

Accident, Suicide, Homicide

Reported by *Richard T. Galt M.D.*Address *Bohsville Md*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 6596B



Willie Donnelly

Town

County

Died at Hunting Hill - Maryland

MARYLAND

Date 189 8- 8th - 11 Y. M. D. Native of Md. Occupation

~~Male~~

White

~~Married~~~~Widow~~~~Divorced~~

Female

~~Colored~~

Single

~~Widower~~

Number of children living

Husband
of

Wife

Father's Name - Donnelly

Mother's Name - Donnelly

Cause of Death { Primary Immediate Typhoid fever

How long sick 2 weeks

Accident, Suicide, Homicide

Reported by

Address O. M. Linthicum Md.
Rockville Md.



Name in Full

Certificate of Death

Charles Gaither

Town

County

Died at

MARYLAND

Month

Day

Y.

M.

D.

Native of

Occupation

Date 1898

Aug. 26

Age

3

6

Maryland

Male

White

~~Married~~~~Widow~~~~Divorced~~~~Female~~~~Colored~~

Single

~~Widower~~

Number of children living

5-

Husband

of

Wife

Father's

Name

George Gaither

Mother's

Name

Joanna Gault

Cause of

Primary

Diphtheria

Death

Immediate

How long sick

5 days

Accident, Suicide, Homicide

Reported by

E. C. Stephens

Address

Gaithersburg, Montgomery Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 1898



Name in Full

Certificate of Death

Mrs Berluida Getzen deussen

Died at ^{near} ~~at~~ ^{Town} Poolesville^{County} Montgomery

MARYLAND

Date 1898 ^{Month} Aug. ^{Day} 16^{Y.} 67. ^{M.} 4 ^{D.} 6

Native of

Occupation

Md.

~~Male~~

White

Married

Widow

~~Divorced~~

Female

~~Colored~~~~Single~~~~Widower~~

Number of children living

None

Husband
of

Edward J. Getzen deussen

Father's

Name

David Young

Mother's

Name

Cause of ^{Primary}

E. coli

How long sick

all week.

Death ^{Immediate}

81

Accident, Suicide, Homicide

Reported by

R. W. Walling

Address

Poolesville, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968



Geo H. Glover

Died at *Frederick* Town *Montgomery* County *MARYLAND*

Date 189 *8* *Aug* *2* Month Day Y. M. D. *11* Native of *Ind* Occupation
 Male *White* ~~Married~~ *Widow* ~~Divorced~~
~~Female~~ ~~Colored~~ *Single* ~~Widower~~ Number of children living *—*

Husband of
 Wife of
 Father's Name *Geo W Glover* Mother's Name *Anna Agnes Harris*

Cause of Death { Primary *Whooping Cough* Immediate *Asphyxia* } How long sick *2 mo*
 Accident, Suicide, Homicide

Reported by *Wm L Lewis M.D.*
 Address *Kneelington Montgomery Co.*



Name in Full

Certificate of Death

Edwin F. Hall

Town

County

Died at

Poolesville

Montgomery

MARYLAND

Month

Day

Y.

M.

D.

Native of

Occupation

Date 1898

Aug. 8th

Age

48

Poolesville

Carpenter

Male

White

~~Married~~~~Widow~~~~Divorced~~~~Female~~~~Colored~~

Single

Widower

Number of children living

Husband

of

Wife

Father's

Name

Irene Hall

Mother's

Name

Maria Beins

Cause of

Primary

Valvular Heart Disease

How long sick

2 months

Death

Immediate

Dropsey

57

Accident, Suicide, Homicide

Reported by

B. H. Walling

Address

Poolesville

Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 1906



Wallace Magruder

Town

County

Died at

Hunting Hill

Montgomery

MARYLAND

Month

Day

Y.

M.

D.

Native of

Occupation

Date 189

8 Aug 5th

Age

20.

Maryland.

Male

White

Married

Widow

Divorced

~~Female~~~~Colored~~

Single

Widower

Number of children living

Husband

of

Wife

Father's

Name

Samuel W Magruder

Mother's

Name

Virginia Polk Inhorn

Cause of

Primary

Death

Immediate

Typhoid Fever

How long sick

28 days

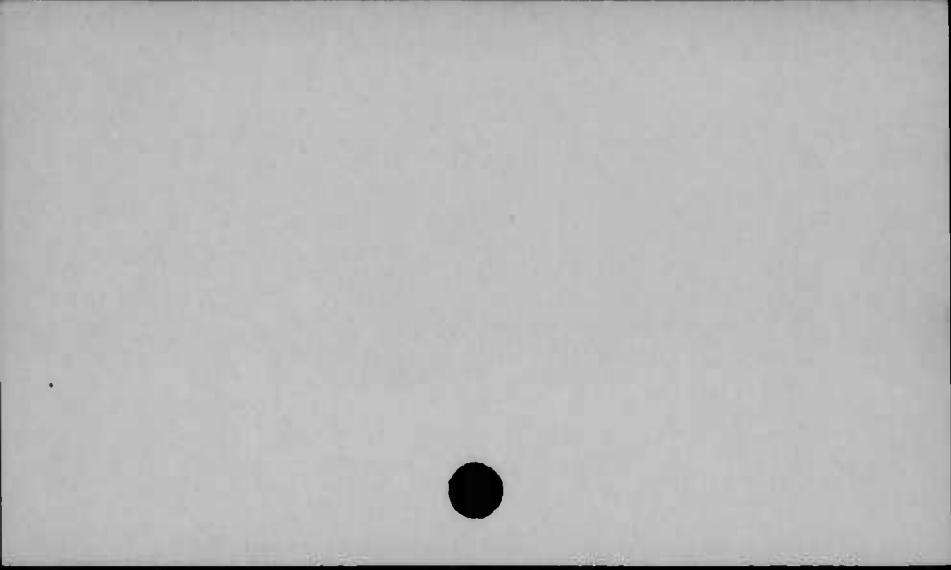
Accident Suicide, Homicide

Reported by

E E Stonestadt M.D.

Address

Rockville Md.



Died at

Elsie Martin
Town
Gaithersburg

County

Montgomery

MARYLAND

Date 189

8

Month

Day

Y.

M.

D.

Native of

Occupation

Age

~~Male~~~~White~~

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband

of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

Consumption

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

Montg. Press. (Kensington) Aug. 26
324

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Eliza H. Matthews

Died at ^{Town} Edward's Ferry - ^{County} Montgomery Co MARYLAND

Month 18 Day 8 Y. M. D. Native of Md Occupation Spinner

Date 1898 Age 81

Male White Married Widowed Divorced
Female Colored Single Widower Number of children livingHusband
of
Wife

Father's Name Mother's Name

Cause of Death { Primary Immediate Malaria 19
How long sick 3 days
Accident, Suicide, Homicide

Reported by Richard T. Gou Jr. &

Address Parkersville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968



Elizabeth

Mewman

Died at

Berthuda

County

Montgomery

MARYLAND

Date 189

8

Month

Day

Aug. 29

Y.

M.

D.

Native of

Occupation

Age

57

Maryland

Housewife

~~Male~~~~White~~

Married

~~Widow~~~~Divorced~~

Female

Colored

Single

~~Widower~~

Number of children living

4

Husband

of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

Arterial Sclerosis

How long sick

2 days

Death

Immediate

Apoplexy

42

Accident, Suicide, Homicide

Reported by

J. L. Lewis

M.D.

Address

Berthuda

Montgomery Co.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Charles Lloyd Nicholson

Town

County

Died at

MARYLAND

Date 1898 Aug. 31

Age 30-2-16

Native of Maryland

Occupation Farmer

Male

White

~~Married~~~~Widow~~~~Divorced~~~~Female~~~~Colored~~

Single

Widower

Number of children living

Husband

of

Wife

Father's

Name

Lloyd H. Nicholson

Mother's

Name

Delila Nicholson

Cause of

Primary

Typhoid Fever

How long sick

23 days

Death

Immediate

Septicopyaemia - after hemorrhage

Accident, Suicide, Homicide

Reported by

Address

Berthuda,

Montgomery Co.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968



Name in Full

Certificate of Death

Eliza L. Obrien

Town

County

MARYLAND

Died at

Date 1898

Month

Day

Y.

M.

D.

Native of

Occupation

August 21

Age

65

Maryland

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband
of
Wife

Father's

Name

Mother's

Name

Cause of

Primary

Pulmonary

Death

Immediate

How long sick

5 days

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65066



Name in Full

Certificate of Death

Thomas J. Packard Jr. Packard

Town Racine County

Died at

MARYLAND

Date 189 8 8 23 Age 14 14 14 Native of Md Occupation

Male

White

Married

Widow

Divorced

~~Female~~~~Colored~~

Single

Widower

Number of children living

Husband
of

Father's
Name

Mother's
Name

Cause of Primary

Death Immediate

How long sick

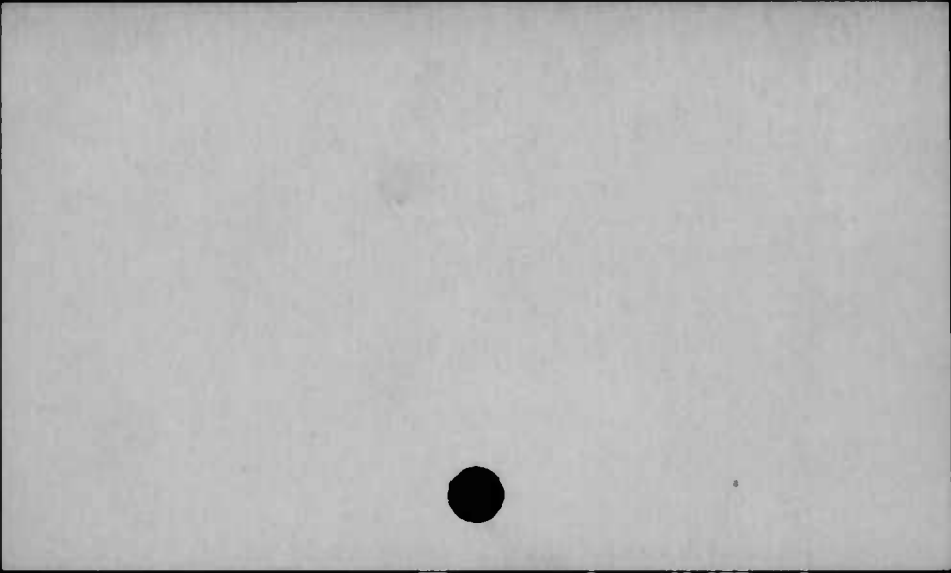
Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65069



Mrs Mattie C Packard

Town

County

Died at

MARYLAND

Rockville, Montgomery

Date 1898

Month

Day

Y.

M.

D.

Native of

Occupation

Aug 11th Age 33

Maryland, Housewife

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living 5

Husband

of

Wife

Father's

Mother's

Name

Name

Cause of

Primary

Death

Immediate

97

How long sick

24 hours

Epileptic Convulsions

Accident, Suicide, Homicide

Reported by

Address

S E Stonecutt M, D.

Rockville Md



Laura Ray

Town

County

MARYLAND

Died at

Linden

Montgomery

Date 189

8

Month

Day

Y

M.

D.

Native of

Occupation

Aug.

1st

Age

20

Md

~~Male~~

White

~~Married~~

Widow

Divorced

Female

~~Colored~~

Single

Widower

~~Number of children living~~

Husband

of

Wife

Father's

Name

Richard T. Ray

Mother's

Name

Bessie Caswell

Cause of

Primary

Pulmonary Tuberculosis

How long sick

14 Mos.

Death

Immediate

Exhaustion

Accident, Suicide, Homicide

Reported by

W. L. Lewis M.D. 222

Address

Kensington

Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Edgar Windsor

Town

County

Died at

Tyrone town Montgomery

MARYLAND

Date 189

8 Aug. 29

Month

Day

Y.

M.

D.

Native of

Occupation

Age

27 1 7

Md -

Tyrone, Tennessee

Male

White

Married

Widow

Divorced

~~Female~~~~Colored~~

Single

Widower

~~Number of children living~~

Husband

of

Wife

Father's

Name

Jack Windsor

Mother's

Name

Mary Jane Stone

Cause of

Primary

Typhoid fever

Death

Immediate

How long sick

29 days

~~Accident, Suicide, Homicide~~

Reported by

J. R. Deets M.D.

Address

Calverton Md -

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

